

**Application Data Sheet**

**Application Information**

Application Number::

**International Application No.**

**PCT/JP2005/000547**

Filing Date::

**PCT filed on January 18, 2005**

**U.S. filing on July 17, 2006**

Application Type::

**US National Phase**

Subject Matter::

**Utility**

Suggested Classification::

Suggested Group Art Unit::

Title::

**HUMAN BODY MONITORING SYSTEM**

Attorney Docket Number::

**IPA-011**

Request for Early Publication::

Request for Non-Publication::

Suggested Drawing Figure::

Total Drawing Sheets::

**5**

### **Applicant Information**

Applicant Authority Type::	<b>Inventor</b>
Primary Citizenship Country::	<b>Japanese</b>
Status::	<b>Full capacity</b>
Given Name::	<b>Tomonori</b>
Middle Name::	
Family Name::	<b>FUJISAWA</b>
Name Suffix::	
City of Residence::	<b>Shinagawa-ku,</b>
State or Province of Residence::	<b>Tokyo,</b>
Country of Residence::	<b>JAPAN</b>
Street of Mailing Address::	<b>c/o KABUSHIKI KAISHA EIGHTING, 20-14</b>
	<b>Minamioui 6-chome, Shinagawa-ku,</b>
State of Mailing Address::	<b>Tokyo,</b>
Postal or Zip Code::	<b>140-0013</b>

### **Applicant Information**

Applicant Authority Type::	<b>Inventor</b>
Primary Citizenship Country::	<b>Japanese</b>
Status::	<b>Full capacity</b>
Given Name::	<b>Shouji</b>
Middle Name::	
Family Name::	<b>SATOU</b>
Name Suffix::	
City of Residence::	<b>Nasushiobara-shi,</b>
State or Province of Residence::	<b>Tochigi,</b>
Country of Residence::	<b>JAPAN</b>
Street of Mailing Address::	<b>635 Kitasakae-cho, Nasushiobara-shi,</b>
State of Mailing Address::	<b>Tochigi,</b>
Postal or Zip Code::	<b>325-0039</b>

### **Correspondence Information**

Correspondence Customer No:: **32628**  
Phone Number:: **(703) 519-9785**  
Fax Number:: **(703) 519-7769**  
E-Mail Address::

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
<b>This Application</b>	<b>US National Stage</b>	<b>PCT/JP2005/000547</b>	<b>January 18, 2005</b>

### **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
<b>JAPAN</b>	<b>2004-009990</b>	<b>January 19, 2004</b>	<b>Yes</b>

### **Assignee Information**

Assignee Name:: **KABUSHIKI KAISHA EIGHTING**  
Street of Mailing Address:: **20-14 Minamioui 6-chome, Shinagawa-ku,**  
City of Mailing Address::  
State of Mailing Address:: **Tokyo,**  
Country of Mailing Address:: **JAPAN**  
Postal or Zip Code:: **140-0013**